

State of California  
ABC-281  
10/99

Department of Alcoholic Beverage Control

License Type: 34 One Day Beer & Wine  
License Nontransferable

LICENSE NO. 9537637  
Receipt No. 2511141  
Fee Paid \$50.00  
Geographical Code 1933

**APPLICATION:**

Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the above designated license(s) for the location also described below.

ORGANIZATION: HOLLYWOOD FOREVER INC-ENDOWMENT CARE & MEMORIAL CARE  
LOCATION ADDRESS: 6000 SANTA MONICA BLVD  
LOS ANGELES, CA 90038

TYPE OF EVENT: OTHER EVENT

HR/DATES DURING WHICH  
ALCOHOL WILL BE SOLD: July 21, 2018  
6PM-12AM

ESTIMATED ATTENDANCE: 3250

AUTHORIZED REPRESENTATIVE / ADDRESS

JAY BOILEAU  
6000 SANTA MONICA BLVD  
LOS ANGELES, CA 90038  
[REDACTED]

**LICENSE:**

The above-named organization is hereby licensed, pursuant to Section 24045.1 of the Business and Professions Code and Rule 59.5 of the California Code of Regulations, to engage in the temporary sale of alcoholic beverages for consumption at the above-named location for the period authorized below. This license does not include off-sale ("to-go") privileges. This license may be revoked summarily by the Department if, in the opinion of the Department and/or the local law enforcement agency, it is necessary to protect the safety, welfare, health, peace, and morals of the people of the State.

Good for 1 day(s). Date Issued July 9, 2018.



Director of Alcoholic Beverage Control

By \_\_\_\_\_

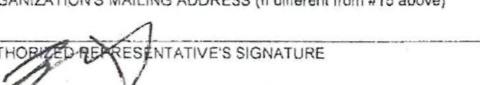
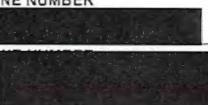
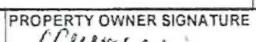
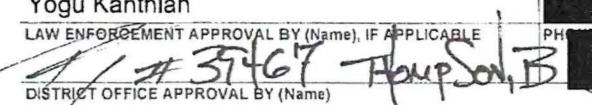
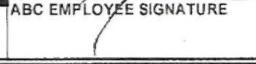
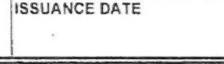
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## DAILY LICENSE APPLICATION/AUTHORIZATION - Non Transferable

Instructions: Complete all items. Submit to local ABC District Office with required fee (Cashier's Check or Money Order) payable to ABC. Once license is issued, fee cannot be refunded. For a listing of ABC District Offices please visit <http://www.abc.ca.gov/distmap.html>

Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the license(s) described below.

LICENSE NUMBER	GEO CODE
9537637	
RECEIPT NUMBER	
2511141	
FEE	
\$ 50	

1. ORGANIZATION'S NAME Hollywood Forever Inc. - Endowment Care & Memorial Care	CONDITIONS REQUIRED <input type="checkbox"/> Yes <input type="checkbox"/> No	DIAGRAM REQUIRED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																
2. LICENSE TYPE (Check appropriate license type AND organization type)																		
a. <input type="checkbox"/> Daily General (\$25.00) (Includes beer, wine and distilled spirits)																		
<input type="checkbox"/> Political Party/Affiliate Supporting Candidate for Public Office or Ballot Measure <input type="checkbox"/> Fraternal Organization in Existence Over Five Years with Regular Membership <input type="checkbox"/> Organization Formed for Specific Charitable or Civic Purpose <input type="checkbox"/> Religious Organization <input type="checkbox"/> Other: <input type="checkbox"/> Vessel per Section 24045.10 B&P (\$50.00)																		
NUMBER OF DISPENSING POINTS																		
b. <input type="checkbox"/> Special Daily Beer (\$25.00) <input checked="" type="checkbox"/> Special Daily Beer & Wine (\$50.00) <input type="checkbox"/> Special Daily Wine (\$25.00) <table border="0"> <tr> <td><input type="checkbox"/> Charitable</td> <td><input type="checkbox"/> Fraternal</td> <td><input type="checkbox"/> Social</td> <td><input type="checkbox"/> Political</td> <td><input type="checkbox"/> Other: _____</td> </tr> <tr> <td><input type="checkbox"/> Civic</td> <td><input type="checkbox"/> Religious</td> <td><input checked="" type="checkbox"/> Cultural</td> <td colspan="2"><input type="checkbox"/> Amateur Sports Organization</td> </tr> </table>			<input type="checkbox"/> Charitable	<input type="checkbox"/> Fraternal	<input type="checkbox"/> Social	<input type="checkbox"/> Political	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Civic	<input type="checkbox"/> Religious	<input checked="" type="checkbox"/> Cultural	<input type="checkbox"/> Amateur Sports Organization							
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<input type="checkbox"/> Civic	<input type="checkbox"/> Religious	<input checked="" type="checkbox"/> Cultural	<input type="checkbox"/> Amateur Sports Organization															
NUMBER OF DISPENSING POINTS 1																		
c. <input type="checkbox"/> Special Temporary License (\$100.00) (Different privileges depending on statute)																		
<input type="checkbox"/> Television Station per Section 24045.2 or 24045.9 B&P <input type="checkbox"/> Person conducting Estate Wine Sale per Section 24045.8 B&P <input type="checkbox"/> Nonprofit Corporation per Sections 24045.4 and 24045.6 B&P <input type="checkbox"/> Women's Educational and Charitable Organization per Section 24045.3 B&P <input type="checkbox"/> Other Special Temporary Licenses, per Section																		
License number _____ Amount \$ _____																		
3. EVENT TYPE <table border="0"> <tr> <td><input type="checkbox"/> Dinner</td> <td><input type="checkbox"/> Dance</td> <td><input type="checkbox"/> Wedding</td> <td><input type="checkbox"/> Lunch</td> <td><input type="checkbox"/> Picnic</td> <td><input type="checkbox"/> Barbeque</td> <td><input type="checkbox"/> Social Gathering</td> <td><input type="checkbox"/> Festival</td> </tr> <tr> <td><input type="checkbox"/> Sports Event</td> <td><input type="checkbox"/> Concert</td> <td><input type="checkbox"/> Birthday</td> <td><input type="checkbox"/> Mixer</td> <td><input type="checkbox"/> Carnival</td> <td><input type="checkbox"/> Dinner Dance</td> <td><input checked="" type="checkbox"/> Other: classic film screening</td> <td></td> </tr> </table>			<input type="checkbox"/> Dinner	<input type="checkbox"/> Dance	<input type="checkbox"/> Wedding	<input type="checkbox"/> Lunch	<input type="checkbox"/> Picnic	<input type="checkbox"/> Barbeque	<input type="checkbox"/> Social Gathering	<input type="checkbox"/> Festival	<input type="checkbox"/> Sports Event	<input type="checkbox"/> Concert	<input type="checkbox"/> Birthday	<input type="checkbox"/> Mixer	<input type="checkbox"/> Carnival	<input type="checkbox"/> Dinner Dance	<input checked="" type="checkbox"/> Other: classic film screening	
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4. TOTAL # OF DAYS 1 5. ESTIMATED ATTENDANCE 3250 6. HOURS OF ALCOHOLIC BEVERAGE SALES, SERVICE AND/OR CONSUMPTION From 6:00pm To 12:00am																		
7. EVENT DATE(S) Saturday 07.21.2018 8. EVENT IS OPEN TO THE PUBLIC <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																		
9. EVENT LOCATION (Give facility name, if any, street number and name, and city) Hollywood Forever Cemetery - 6000 Santa Monica Blvd, Los Angeles, CA 90038																		
10. LOCATION IS WITHIN THE CITY LIMITS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 11. TYPE OF ENTERTAINMENT classic film screening: FRIDAY 12. SECURITY GUARDS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many? 25																		
13. AUTHORIZED REPRESENTATIVE'S NAME Jay Boileau 14. REPRESENTATIVE'S TELEPHONE NUMBER _____																		
15. REPRESENTATIVE'S ADDRESS 6000 Santa Monica Blvd, Los Angeles, CA 90038																		
16. ORGANIZATION'S MAILING ADDRESS (If different from #15 above)																		
17. AUTHORIZED REPRESENTATIVE'S SIGNATURE 		18. DATE SIGNED 06.21.2018																
PROPERTY OWNER APPROVAL BY (Name), REQUIRED Yogu Kanthiah		PHONE NUMBER 	PROPERTY OWNER SIGNATURE  DATE SIGNED 06.21.2018															
LAW ENFORCEMENT APPROVAL APPROVAL BY (Name), IF APPLICABLE 		PHONE NUMBER 	LAW ENFORCEMENT SIGNATURE  DATE SIGNED 06.21.2018															
DISTRICT OFFICE APPROVAL APPROVAL BY (Name)		ABC EMPLOYEE SIGNATURE 	ISSUANCE DATE 															

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